

# BEST AVAILABLE COPY

CLAIMS ONLY						SERIAL NO.	FILING DATE		
						APPLICANT(S)			
CLAIMS									
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		*	*	*
	IND.	DEP.	IND.	DEP.	IND.	DEP.			
1	/								
2		/							
3		/							
4		/							
5		/							
6		/							
7		/							
8		/							
9		/							
10		/							
11		/							
12		/							
13		/							
14		/							
15	/								
16		/							
17		/							
18		/							
19		/							
20		/							
21		/							
22		/							
23		/							
24		/							
25		/							
26		/							
27	/								
28		/							
29	/								
30		/							
31		/							
32									
33									
34									
35									
36									
37									
38									
39									
40									
41									
42									
43									
44									
45									
46									
47									
48									
49									
50									
TOTAL IND.	24								
TOTAL DEP.	28								
TOTAL CLAIMS	31								
* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS									